

**UNITED STATES PATENT & TRADEMARK OFFICE**  
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND				5893087	
1 Date of Request: 02/23/07		2 Serial/Patent # 08/633,842			
3 Please refund the following fee(s):		4 PAPER NUMBER	5 DATE FILED	6 AMOUNT	
	Filing			\$	
	Amendment			\$	
	Extension of Time			\$	
	Notice of Appeal/Appeal			\$	
X	Petition			\$ 1,150.00	
	Issue			\$	
	Cert of Correction/Terminal Disc.			\$	
	Maintenance			\$	
	Assignment			\$	
X	Other petition renew			\$ 1,200.00	
		7 TOTAL AMOUNT OF REFUND		\$ 2,350.00	
		8 TO BE REFUNDED BY: <i>credit card</i>			
10 REASON:		<div style="border: 1px solid black; padding: 5px;"> Treasury Check  X Credit Deposit A/C #: <span style="border: 1px solid black; display: inline-block; width: 100px; height: 20px; vertical-align: middle;"></span> </div>			
X Overpayment					
Duplicate Payment					
No Fee Due (Explanation):		9 <span style="border: 1px solid black; display: inline-block; width: 100px; height: 20px; vertical-align: middle;"></span>			
error made in granting petition; patent still expired for failing to pay 4 yr maintenance fee;					
renew fee waive because decision being vacated					
11 REFUND REQUESTED BY:					
TYPED/PRINTED NAME: A. Au		TITLE: Pet. Exm			
SIGNATURE: _____		PHONE: 7414			
OFFICE: Office of Petitions					
***** THIS SPACE RESERVED FOR FINANCE USE ONLY: *****					
APPROVED: <i>[Signature]</i>		DATE: 5/29/07			

*Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:*

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Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND												
1 Date of Request: 02/23/07		2 Serial/Patent # 08/633,842										
3 Please refund the following fee(s):		4 PAPER NUMBER	5 DATE FILED	6 AMOUNT								
	Filing			\$								
	Amendment			\$								
	Extension of Time			\$								
	Notice of Appeal/Appeal			\$								
	Petition			\$								
	Issue			\$								
	Cert of Correction/Terminal Disc.			\$								
X	Maintenance		10/06/06	\$ 1,150.00								
	Assignment			\$								
	Other			\$								
		7 TOTAL AMOUNT OF REFUND		\$ 1,150.00								
		8 TO BE REFUNDED BY:										
10 REASON:		Treasury Check										
	Overpayment	X	Credit Deposit A/C #:									
	Duplicate Payment		9 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="width: 20px; text-align: center;">2</td><td style="width: 20px; text-align: center;">0</td><td style="width: 20px; text-align: center;">--</td><td style="width: 20px; text-align: center;">1</td><td style="width: 20px; text-align: center;">4</td><td style="width: 20px; text-align: center;">3</td><td style="width: 20px; text-align: center;">0</td></tr></table>			2	0	--	1	4	3	0
2	0	--	1	4	3	0						
X	No Fee Due (Explanation):											
error made in granting petition; patent still expired for failing to pay 4 yr maintenance fee;												
therefore 8 year maintenance fee payment is being refunded												
11 REFUND REQUESTED BY:												
TYPED/PRINTED NAME: A. Au		TITLE: Pet. Exm										
SIGNATURE:		PHONE: 7414										
OFFICE: Office of Petitions												
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**Office of Finance  
Refund Branch  
Crystal Park One, Room 802B**